

Cardiorenal Risk Management at the Interface of Primary Care and Cardiology

Summary of lecture held by prof Richard Hobbs on August 28, 2026 at ESC congress in Munich

Professor Richard Hobbs (University of Oxford) argues that managing cardiorenal risk depends on how well primary care and cardiology work together, and how those teams engage with patients.

Background

- Chronic kidney disease (CKD) and diabetes are now recognised as major risk enhancers for all key cardiovascular outcomes. This has led to cardiovascular disease being reframed as "cardio-renal-metabolic" (CKM).
- These conditions worsen outcomes at every stage, from patients with only risk factors to those with subclinical or established disease. Preventing events matters both for patients and families and for healthcare costs.

Problem 1: CKD is underdiagnosed

- eGFR testing is widely done, but UACR testing (which detects protein leaking from the kidney) lags far behind.
- In the US, fewer than 40% of people with diabetes get the UACR testing guidelines require.
- A 2026 systematic review of 30 studies found UACR testing rates of 22–49% in patients with diabetes, hypertension or both.
- A key reason is that practices don't realise missing CKD can lead to significant harm.

Problem 2: CKD is undertreated

- SGLT2 inhibitors are a major treatment advance, but uptake is poor.
- A US real-world study of about 3 million patients found only about 12% of eligible patients with diabetes and CKD were on an SGLT2 inhibitor, despite a grade 1A recommendation. Among eligible patients without diabetes, the figure was only about 3%.

What guidelines recommend

- Better communication and multidisciplinary management of CKM syndrome.
- Each health system needs to work out how primary care, secondary care and other specialties coordinate, and how those teams interface with patients.

Takeaway

Closing the gaps in UACR testing and SGLT2 inhibitor prescribing requires identifying the barriers

at the primary–secondary care interface and solving them. Hobbs presents this as the central educational task of the talk.